Entered 01/28/19 13:12:07 Case 19-60050-6-dd Filed 01/28/19 Doc 11 Document Page 1 of 48 Fill in this information to identify your case and this filing: Robert William Tecler Debtor 1 Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of New York 19-60050-6 Case number heck if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 76 Woodard Road Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the ☐ Manufactured or mobile home entire property? portion you own? 398,000.00 398,000.00 Investment property Wilton NY 12866 ☐ Timeshare Describe the nature of your ownership City State ZIP Code interest (such as fee simple, tenancy by Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one, Debtor 1 only Saratoga Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: 1.2. Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? ☐ Land ☐ investment property Describe the nature of your ownership ☐ Timeshare City State ZIP Code interest (such as fee simple, tenancy by ☐ Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:

What is the property? Check all that apply.    Single-family home	Débtor 1	Case 19-60050-6-dd Doc 11 Robert William Tecler	Document Page 2 of 🕬 number (##	<sub>known)</sub> 19-60050-6		
Street address, if available, or other description   Duplex or matifunit building   Duplex or matifunit building   Current value of the critic property   Duplex or matifunit building   Current value of the entire property   Duplex or matifunit building   Current value of the entire property   Describe the nature of your ownership interest (auch as fee simple, tenancy it the entireties, or a fife existe), if know   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Deb		First Name Middle Name Last Name				
Sheet address, if available, or other description   Duplex or multi-unit building   Current value of the condomination or cooperative   Manufactured or mobile home   Land   Investment property   Immehance   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy it the entireties, or a fife existe), if know   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simple, tenancy   Describe the nature of your ownership interest (such as fee simpl						
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City   State   ZIP Code   Investment property   Investment property   Check one.   Check if this is community property   Check if this is community property   Check one.   Check if this is community property		Street address, if available, or other description	☐ Condominium or cooperative ☐ Manufactured or mobile home		portion you own?	
Gity State ZiP Code   Timeshare   Describe the nature of your ownership interest (such as fee simple, tenancy the entireties, or a life estate), if known who has an interest in the property? Check one.   Check if this is community property   Check in this is community property   Check if the interproperty   Check if the interproperty				Ψ	Ψ	
Other		City State 7IP Code	<u> </u>	Describe the nature of	of your ownership	
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Other Information you wish to add about this item, such as local property identification number:  Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.  Describe Your Vehicles  Who has an interest in the property? Check one.  Describe Year:  Describe Your Vehicles  Describe Yo		•		Check if this is co	mmunity property	
Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.  Describe Your Vehicles  Describe Your Vehicles  Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles u own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.  Cars, vans, trucks, tractors, sport utility vehicles, motorcycles  Model:  Do not deduct secured daims or exemptions. If the amount of any secured daims or exemptions on Schedule G: Executory Contracts and Unexpired Leases.  Do not deduct secured daims or exemptions. If the amount of any secured daims or exemptions on Schedule G: Executory Contracts and Unexpired Leases.  Approximate mileage:  Approximate mileage:  Current value of the entire property?  Do not deduct secured daims or exemptions. If the entire property?  Current value of the entire property?  Contracts who have Claims Secured daims or exemptions. If you own or have more than one, describe here:  3.2 Make:  Who has an interest in the property? Check one.  Model:  Do not deduct secured daims or exemptions. If the entire property?  Conditions Who Have Claims Secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amount of any secured daims or exemptions. If the amo					<b>.</b> []	
Describe Your Vehicles  Describe Your Vehicles  Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles are understand unders			Other information you wish to add about this ite property identification number:	em, such as local		
Describe Your Vehicles  Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles under the same of the debtors and Unexpired Leases.  Cars, vans, trucks, tractors, sport utility vehicles, motorcycles  No Yes  3.1. Make:  Model:  Debtor 1 only  Year:  Debtor 2 only  Approximate mileage:  Other information:  Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Find the amount of any secured claims or exemptions of the amount of any secured claims on Schedule Carditions Who Have Claims Society by Property.  Current value of the entire property?  Other information:  Check if this is community property (see instructions)  If you own or have more than one, describe here:  3.2. Make:  Model:  Debtor 1 only  Current value of the entire property?  Who has an interest in the property? Check one. In a community property (see instructions)  Do not deduct secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or exemptions. Find the amount of any secured claims or ex	8 al al 4	ha dallar valua of the newton year own for s	Il of your antring from Bart 1. including any antring	e for mages	308 000 0	
Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles upon that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.  Cars, vans, trucks, tractors, sport utility vehicles, motorcycles  No Yes  3.1. Make:    Model:	you h	ne dollar value of the portion you own for a lave attached for Part 1. Write that number i	nere	s for pages	\$ <u>398,000.0</u>	
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Case 19-60050-6-dd Doc 11 Filed 01/28/19 Entered 01/28/19 13:12:07 Document Page 3 of 48 number (if known) 19-60050-6 Robert William Tecler Débtor 1 Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4,2, Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Dèbtor 1

#### **Describe Your Personal and Household Items**

Do you	u own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	usehold goods and furnishings amples: Major appliances, furniture, linens, china, kitchenware	
	No Yes. Describe	\$
— . –	ectronics amples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	No Yes, Describe	\$
Exa	lectibles of value  amples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No Yes. Describe	S
9. <b>Eq</b> t	uipment for sports and hobbies  amples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	Ψ
	No Yes. Describe	\$
2	earms amples: Pistols, rifles, shotguns, ammunition, and related equipment  No Yes. Describe	\$
11. Clo Exa		\$
<b>2</b>	welry amples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	\$
13. <b>No</b> i <i>Ext</i>	n-farm animals  amples: Dogs, cats, birds, horses	
	Yes. Describe y other personal and household items you did not already list, including any health aids you did not list	\$
	No Yes. Give specific Information	\$
	d the dollar value of all of your entries from Part 3, including any entries for pages you have attached - Part 3. Write that number here	\$

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Debtor 1

Middle Name

Do you own or have any	legal or equitable interest in	any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>Cash</b> <i>Examples:</i> Money you l	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petition	
☑ No			
		Cash:	\$ <u> </u>
		unts; certificates of deposit; shares in credit unions, brokerage hous nultiple accounts with the same institution, list each.	es,
☑ No			
☐ Yes		Institution name:	
	17.1. Checking account:		\$
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		_ \$
	17.6. Other financial account:		_ \$ <u> </u>
	17.7. Other financial account:		_ \$
	17.8. Other financial account:		\$
	17.9. Other financial account:		<b>\$</b>
	or publicly traded stocks	erage firms, money market accounts	
No	myestment accounts with brok	orage mins, money market accounts	
☐ Yes	Institution or issuer name:		
			\$
			\$
		<del>_</del> ,	<b> \$</b>
		rated and unincorporated businesses, including an interest in	
an LLC, partnership, a	•		
Yes. Give specific	Name of entity:	% of ownership: 	ø
information about	·		Φ

0%

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Pobert Villi First Name		Document	Page 6 of 48 number	T (If known) 19-60050-6	
			-	· · · · · · · · · · · · · · · · · · ·	
		r negotiable and non-neg			
Negotiable instruments i Non-negotiable instrume	nclude personal checkents are those you can	s, cashiers' checks, promis not transfer to someone by	ssory notes, and money orde signing or delivering them.	ers.	
<b>⊿</b> No	• • • • • • • • • • • • • • • • • • •	•			
Yes. Give specific	Issuer name:				
information about them				\$	
				٧.	
			<del></del>		
Retirement or pension Examples: Interests in IF		1(k), 403(b), thrift savings a	accounts, or other pension or	r profit-sharing plans	
<b>⊿</b> No		· / /			
Yes. List each	To a conference of the confere	In ality tion name.			
account separately.	Type of account:	Institution name:		<b>d</b>	
	401(k) or similar plan:				
	Pension plan:		<u> </u>	\$.	<del></del> -
	IRA:			\$	
	Retirement account:		<del>_</del>	\$.	<del>-</del>
	Keogh:			\$	
	Additional account:			\$	<u> </u>
	Additional account:			\$.	
	l deposits you have ma		ue service or use from a con ic, gas, water), telecommunio		
2 No 2 Yes	Ine	titution name or individual:			
	Electric:	and the state of t		\$	
	Gas:				
	Heating oil:				
	Security deposit on ren	tal unit:		\$	
	Prepaid rent:				
	Telephone:				
	Water:				
	Rented furniture:	••••		<b></b> \$_	

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

Annianico (A contract lo	a periodic payment of mercy to you, extent for the or for a number of yearsy	
☑ No		
☐ Yes	Issuer name and description:	
		\$
		\$

Case 19-60050-6-dd Doc 11 Filed 01/28/19 Entered 01/28/19 13:12:07 Desc Main Robert William Tecler Document Page 7 of 48 number (if known) Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☑ No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **2** No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ✓ No ☐ Yes, Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☑ No Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☑ No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. ..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☑ No Yes, Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else 2 No Yes. Give specific information......

Case 19-60050-6-dd Filed 01/28/19 Entered 01/28/19 13:12:07 Page 8 of 48 number (if known) 19-60050-6 Robert William Tecler Debtor 1 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. ☐ Yes. Name the insurance company Beneficiary: Surrender or refund value: Company name: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ✓ No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **☑** No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims 2 No Yes. Describe each claim..... 35. Any financial assets you did not already list **⊿** No ☐ Yes. Give specific information.......... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No Yes, Describe..... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ No ☐ Yes. Describe..

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o. Machinery, fixtures, equipment, supplies you use in business, and tools o	of your trade
□ No	
Yes. Describe	
1. Inventory	
□ No □ Yes. Describe	The state of the s
Tes. Describe	
2. Interests in partnerships or joint ventures	
☐ No	
☐ Yes. Describe Name of entity:	% of ownership:
<u> </u>	% \$
	a
<u> </u>	
3. Customer lists, mailing lists, or other compilations	
□ No	
Yes. Do your lists include personally identifiable information (as define	ed in 11 U.S.C. § 101(41A))?
No special basic location and a street of the street of th	
Yes. Describe	\$
and the state of t	; · <del>- · · · · · · · · · · · · · · · · · </del>
4. Any business-related property you did not already list	
No	
☐ Yes. Give specific	\$
information	
	\$
	<u> </u>
	\$
	<u> </u>
5. Add the dollar value of all of your entries from Part 5, including any entri	
for Part 5. Write that number here	→ \ <u> </u>
art 6: Describe Any Farm- and Commercial Fishing-Related Proof of the If you own or have an interest in farmland, list it in Part 1.	pperty You Own or Have an Interest In.
6. Do you own or have any legal or equitable interest in any farm- or comm	ercial fishing-related property?
☑ No. Go to Part 7. ☐ Yes. Go to line 47.	
Tes. Go to jille 47.	
	Current value of the portion you own?
	Do not deduct secured claims
	or exemptions.
7. Farm animals	
Examples: Livestock, poultry, farm-raised fish	
□ No	
☐ Yes	
	\$
t i in ellen elle metata metata kerinta kata kata kata kata kata kata kata k	T-

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48. Crops—either growing or harvested	
☐ No ☐ Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No Yes	
50. Farm and fishing supplies, chemicals, and feed	\$
□ No □ Yes	
51. Any farm- and commercial fishing-related property you did not already list	<b>\$</b>
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	
☑ No ☐ Yes. Give specific information	\$ \$ \$
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	\$398,000.00
56. Part 2: Total vehicles, line 5	
57. Part 3: Total personal and household items, line 15	
58. Part 4: Total financial assets, line 36	
59. Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 +\$	
62. <b>Total personal property.</b> Add lines 56 through 61	+\$
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$398,000.00

Entered 01/28/19 13:12:07 Case 19-60050-6-dd Filed 01/28/19 Doc 11 Document Page 11 of 48 Fill in this information to identify your case: Robert William Tecler Debtor 1 Debtor 2 (Spouse, if filing) First Name Last Name Middle Name United States Bankruptcy Court for the: Northern District of New York ₩ 19-60050-6 Case number ☐ Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, If you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Check only one box for each exemption. Copy the value from Schedule A/B Brief **□** \$ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **\$** description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: □ \$ description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No Yes

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Debtor 1

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	□\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>\$</b>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	. 📮 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	. 🗆 \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	. 🛄 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	. 📮 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	

	-			
Case 19-60050-6-dd	Doc 11 Filed 01/2 Document	28/19 Entered 01 Page 13 of 48	/28/19 13:12:07	Desc Main
Fill in this information to identify your cas	e:			
Debtor 1 Robert William Tecler				
First Name Middle N				
(Spouse, if filing) First Name Middle t				
United States Bankruptcy Court for the: Northern	DISTRICT OF NEW YORK			
Case number (If known)				Check if this is an amended filing
				anjonaea iiinig
Official Form 106D				
Schedule D: Creditor	s Who Have (	Claims Secur	ed by Prope	erty 12/15
Be as complete and accurate as possible information. If more space is needed, cop additional pages, write your name and car	y the Additional Page, fill	filing together, both are e it out, number the entries,	qually responsible for a and attach it to this fo	supplying correct rm. On the top of any
<ol> <li>Do any creditors have claims secured to No. Check this box and submit this for Yes. Fill in all of the information below</li> </ol>	m to the court with your other	er schedules. You have noth	ing else to report on this	form.
Part 1: List All Secured Claims				
List all secured claims. If a creditor has a for each claim. If more than one creditor I As much as possible, list the claims in alp	nas a particular claim, list the	e other creditors in Part 2.	Amount of claim V	olumn B Column C alue of collateral Unsecured nat supports this portion laim If any
2.1 US National Bank	Describe the property the	at secures the claim:	\$ 710,000.00	398,000.00 \$
Creditor's Name 8950 Cypress Waters Byld	76 Woodard Road W	/ilton NY 12831		
Number Street	-		İ	

As much as possible, list the claims in alph	value	of collateral.	clai	<b>m</b> If any	
US National Bank	Describe the property that secures the claim:	\$	710,000.00	\$	398,000.00 <sub>\$</sub>
Creditor's Name 8950 Cypress Waters Bvld Number Street	76 Woodard Road Wilton NY 12831				
Coppell TX 75019 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)				
☐ Check if this claim relates to a community debt  Date debt was incurred 05/20/200€	Last 4 digits of account number 9 2 9 2				
2.2 Bank of America NA	Describe the property that secures the claim:	\$	472,000.00	\$ <u>_</u>	398,000.00 \$
Creditor's Name 450 American Street Number Street	76 Woodard Road Wilton NY 12831				
Simi Valley CA 93065 City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	í.			
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	_			
Date debt was incurred 08/05/2007	Last 4 digits of account number 8 0 0 7	Ţ.,	1,182,000.00	<u> </u>	
Add the dollar value of your entries in	Column A on this page. Write that number here:		1, 102,000.00	]	

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Debtor 1

Robert William Tecler

Name	Middle Name	 Last

Case number (# known) 19-60050-6

Additional Page  Part 1: After listing any entries on this page by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Value of collateral Uns	umn C secured tion
	Describe the property that secures the claim:	• \$	s \$	
Creditor's Name	bossilbs tils property till a second of the	<u></u>	·	
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number	ттанцициитарфайлійа.А.23.2 7 fa ч в ила поманення 1764-1996/00/айняй240	Luridia makkina (Kawaisa Kossioro) Kikin na rijeneka a a nakin okki kasioko <b>ske sakokin</b> a a naki	MITTONIOSO TODOS SESSES TIMBOLO LA
	Describe the property that secures the claim:	\$	\$ _ \$	
Creditor's Name		·- <u></u>	·	
Number Street				
Number Street	As of the date you file, the claim is: Check all that apply.	.1		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$\$_	
Creditor's Name		]		
Number Street				
•	As of the date you file, the claim is: Check all that apply.	J		
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	s in Column A on this page. Write that number here:	\$ 1,182,000.00		
If this is the last page of your form, Write that number here:	, add the dollar value totals from all pages.	\$_1,182,000.00		

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Robert William Tecler

Middle Name Last Name Case number (# known) 19-60050-6

Part 2:	List Others to Be N	otified for a Debt	That You Already	Listed
agency vou hav	is trying to collect from YOU.	for a debt you owe to any of the debts that	someone else, list th you listed in Part 1, l	a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if the additional creditors here. If you do not have additional persons to
RA	S Borskin LLC, ATTN:	Amanda Moreno	, Esq.	On which line in Part 1 did you enter the creditor?
Nam			<u>· ·</u>	Last 4 digits of account number 9 2 9 2
900	Merchants Concourse	€		
Num	ber Street			_
	estbury	NY	11590	_
City	·	State	ZIP Code	_
	чим и или на при	6220 2700 An House Le League Luciens (C. And C. And	egica go en nome a sing gammigo, saliti sullavoldo dell' el l'el el el el 1969 el	On which line in Part 1 did you enter the creditor?
Nam	е	<del> </del>		Last 4 digits of account number
Num	ber Street	·		_
Nun	ger Street			_
				-
City		State	ZIP Code	Bacarantees and all \$1 - \$1/3.3 QC (Sp. V) gray or may commission and bidd OCERA OCERA (SC Sp. V) gray in the gray or the control of the cont
				On which line in Part 1 did you enter the creditor?
Nam		·		Last 4 digits of account number
Num	ber Street			_
·-				_
		<u></u>		_
City	n de se a se consultable and an i i i i i i i i i i i i i i i i i i	<b>State</b>	ZIP Code	2. N.C. 1. 20 D G 85 NET SECTION OF THE ANALYSIS AND
				On which line in Part 1 did you enter the creditor?
Nam	e	-		Last 4 digits of account number 9 2 9 2
Num	ber Street			_
				_
City	·	State	ZIP Code	_
	er filder som filder som er samaratik om sakkendikkeldet (1720–1940). Filder		communication accounts make any service	mentarione, perspensiva and acceptant delivers and acceptant of the company of th
<u></u>	<del> </del>			On which line in Part 1 did you enter the creditor?
Nan	ie			Last 4 digits of account number
Nun	ber Street			<u>-</u>
		<del></del>		_
City		State	ZIP Code	_
	Will of the Andrew Area of the Co. St. Comment (Const. of think and the Co. of the Co. o	THE ANY PROJECT OF AN ARMADIST AND STORE AND ARMADIST AND	material and a superior of the	On which line in Part 1 did you enter the creditor?
Nan	nė			Last 4 digits of account number
	· <del>-</del>			
Nun	nber Street		·	_

City

ZIP Code

State

- Fil	Case 19-60050-6-dd Doc 11	Filed 01/28/19 E	Entered 01/28/19 1 of 48	L3:12:07	Desc Ma	iin
	30 /	<u> </u>				
De	btor 1 Robert William Tecler First Name Middle Name	Last Name	-			
	ebtor 2 pouse, if filing) First Name Middle Name	Lest Name				
Un	ited States Bankruptcy Court for the: Northern District o	f New York			_	
Ca	ase number 19-60050-6	_				k if this is an ded filing
	known)				anieni	ueu ming
	ficial Form 106E/F	The Herre II.	aurad Claims	_		4045
	chedule E/F: Creditors W	4.4%				12/15
List A/B cred nee- any	as complete and accurate as possible. Use Part the other party to any executory contracts or un a Property (Official Form 106A/B) and on Schedulitors with partially secured claims that are listeded, copy the Part you need, fill it out, number the additional pages, write your name and case nur	nexpired leases that could re ule G: Executory Contracts a d in Schedule D: Creditors V he entries in the boxes on th mber (if known).	sult in a claim. Also list nd Unexpired Leases (Of /ho Have Claims Secured	executory co ficial Form 10 I by Property	ntracts on <i>Sc</i> . I6G). Do not ir . If more space	<i>hedule</i> nclude any e is
Pai	t 1: List All of Your PRIORITY Unsecure	ed Claims		<del>-</del>		
	Do any creditors have priority unsecured claims  No. Go to Part 2.	against you?				
	Yes. List all of your priority unsecured claims. If a cre	aditor has more than one priori	ty uneacured claim, list the	creditor sens	rately for each	claim For
	each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the c unsecured claims, fill out the Continuation Page of I	a claim has both priority and no laims in alphabetical order acc Part 1. If more than one credito	onpriority amounts, list that ording to the creditor's nar or holds a particular claim, l	: claim here an ne. If you have	id show both pi more than two	riority and o priority
	(For an explanation of each type of claim, see the in	nstructions for this form in the i	nstruction booklet.)	Total claim	Priority	Nonpriority
				TOTAL CIAITI	amount	amount
2.1		t	shau S	<b>.</b>	\$	\$
L	Priority Creditor's Name	Last 4 digits of account num	iber		<u> </u>	. *
	Number	When was the debt incurred	?			
	Number Street	As of the data you file the o	falm is: Chark of that analy			
		As of the date you file, the c  Contingent	iaini is. Check an mar appry.			
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	•				
	Debtor 2 only	Type of PRIORITY unsecu	red claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligation				
	At least one of the debtors and another	Taxes and certain other deb	ts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or persona	l injury while you were			
	Is the claim subject to offset?	intoxicated  Other. Specify				
	☐ No ☐ Yes	U Other, Specify				
<u> </u>	TRS  Control to the Control of Co					
2.2	Priority Creditor's Name	Last 4 digits of account nun	iber <u> </u>	S	_ \$	_ \$
		When was the debt incurred	?			
	Number Street	As of the date you file, the c	laim is: Check all that apply			
		☐ Contingent	iam for officer all tract apply.			
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one,	Disputed				
	Debtor 1 only	•	t-t			
	Debtor 2 only	Type of PRIORITY unsecu				
	Debtor 1 and Debtor 2 only	Domestic support obligation				
	At least one of the debtors and another	Taxes and certain other det				
	☐ Check if this claim is for a community debt	<ul> <li>Claims for death or personal intoxicated</li> </ul>	ı ınjury wniie you were			
	Is the claim subject to offset?	Other, Specify				
	□ No					
	Yes		•			

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Debtor 1 Page 17 of 48

Description of 48

er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
_	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name	When was the debt incurred?			
Number Street	<u> </u>			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>			
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
☐ No				
Yes	n september	and the Abrildesian expension of the company of the	van namen volkstätte (226 deman en en en en et et et e	nii e ekontaren ir
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	East 4 digits of account flumber	V	<u> </u>	_
N	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	<u> </u>			
City State ZIP Code	☐ Contingent☐ Unliquidated			
City State ZIP Code	Disputed			
Who Incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Taxes and certain other debts you owe the government			
_	Claims for death or personal injury while you were intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
□ No				
Yes		70g.zc v 62 4 1 cm3 at 200 hoga iii 200 e00000000000000 een aan a aa aa at at at at oo	)	egry proggery ophosphilite air all a progression also below
	Last 4 digits of account number	\$	<u>  \$</u>	_ \$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	Toward DDIODITY			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated  Other. Specify	ne progressioner designation and experient	ZOWIENIA LANISO (NE RESERVITORIA VON M.).	在APANESSON (1985年1984年1985年1985年1985年1985年1985年1985年1985年1985
Is the claim subject to offset?	Onto opening			
No				
Yes				

Debtor 1	Case 19v	ngg5 <del>0</del> -6-edd	Doc 11	Filed 01/28	/19	Entered 01/	28/19 ber (if known	43-18097-6	Desc N	√ain
Ø	First Name	Middle Name	Last Name	Document	Page	e 18 of 48	, ,			

- Gi	<u> </u>		:
3 [	Do any creditors have nonpriority unsecured claims	s against you?	
	☑ No. You have nothing to report in this part. Submit t		
	<ul><li>No. You have nothing to report in this part. Submit t</li><li>Yes</li></ul>	inis form to the Court with your other solicuties.	:
,	→ Yes		
, ,	int all of your name in the construct alaims in the	alphabetical order of the creditor who holds each claim. If a creditor has	more than one
4. L	ist all of your nonpriority unsecured claims in the	for each claim. For each claim listed, identify what type of claim it is. Do not	list claims already
ŗ	compriority unsecured claim, list the creditor separately	ticular claim, list the other creditors in Part 3.If you have more than three nor	noriority unsecured
	claims fill out the Continuation Page of Part 2.	godiai oldini, list tilo otiloj oloditolo lii i dit olii yez lidio ilieta ili	,
	dains illi out the Continuation Fage of Fait 2.		State of the second of the second
			Total claim
$\neg$			Account to the second of the s
1.1		Last 4 digits of account number	
	Nonpriority Creditor's Name	<del></del>	\$
		When was the debt incurred?	:
	Number Street	<del></del>	
	Number Street		
		Code As of the date you file, the claim is: Check all that apply.	
	City State ZIP	Code As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	-		
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	!
	At least one of the debtors and another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce	
	Check if this claim is for a community debt	that you did not report as priority claims	·
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
		· · · · · · · · · · · · · · · · · · ·	'
	□ No	Other. Specify	
	☐ Yes		
			Manuscriptura ( one se sector el trom trom trom el trom se sector se se sector el trom de la final de
4.2		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
			į
	Ni.mbay Cironi	<del></del>	
	Number Street	As of the date you file, the claim is: Check all that apply.	:
		As of the date you file, the claim is: Check all that apply.	
		Code	
	City State ZIP	-	
	City State ZIP Who incurred the debt? Check one.	Code Contingent Unliquidated	
	City State ZIP Who incurred the debt? Check one.  Debtor 1 only	Code	
	City State ZIP Who incurred the debt? Check one.	Code Contingent Unliquidated Disputed	
	City State ZIP Who incurred the debt? Check one.  Debtor 1 only	Code Contingent Unliquidated	
	City State ZIP  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	Code Contingent Unliquidated Disputed	
	City State ZIP  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Code  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce	
	City State ZIP  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Code  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans	
	City State ZIP  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt	Code  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce	S S
	City  State  ZIP  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt is the claim subject to offset?	Code  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	5
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43	City  State  ZIP  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No	Code  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
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4,3	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset? No Yes  Nonpriority Creditor's Name  Number Street  City State 21F  Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Code  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
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# Debtor 1 . Case 19-60050-6-dd First Name Middle Name

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Part	2

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them beginning with 4	4.4, followed by 4.5, and so forth.	Total claim
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	Ψ
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Student loans	
	At least one of the deptors and another	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	□ No		
	☐ Yes		
	уст (тож 18 - 2 доку (дот ученування д. 19 2 - 2 д тожности выда, доку Сточности в воду в прогодования (3 го от отвещения выпользования доку в прогодования в подавления доку в прогодования в подавления в подав	Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising cut of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	□ No		
	Yes		
	<ol> <li>Company of the Company /li></ol>	Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	□ No □ Yes	. ,	
	e e e e e e e e e e e e e e e e e e e	Martina (n. 11. Martina) (n. 11. m.) (n. 1	Va.

~Debtor 1 \*

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Part 3:

#### List Others to Be Notified About a Deht That You Already Listed

tample, if a collection agency is trying to collection agency here. Similar	llect from you fo	or bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or ore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		☐ Part 2: Creditors with Nonpriority Unsecured Clair
		Last 4 digits of account number
City State	ZIP Code	Last 4 digits of account number
City State		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Obes 1		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
Number Street		Claims
		Last 4 digits of account number
City	ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
City State	ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	<del></del>	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
	· · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number
City State	ZIP Code	appropriate the company of the control of the Control of the company of the company of the control of the contr
Name ·		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
	<del></del>	Claims
City State	ZIP Code	Last 4 digits of account number
5. C Wight with the contribution of the second contribution and desired by the second contribution of the second contribution	OC DE DE DESERVA ANT OFF THE OWN SHAPE OF THE STREET OF THE OWN SHAPE OWN	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City State	ZIP Code	Last 4 digits of account number
angarin ke maharin 1999 anggapagar sa 1935 sabah-dalambah <mark>anggapan sa 49 49 49 49 49 49 49 49 49 49 49 49 49 </mark>	Aurine Angele va version of the Property of the Paris	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
		Claims
		Last 4 digits of account number
City State	ZIP Code	— · · · · · · · · · · · · · · · · · · ·

State

City

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Tatal alaim

Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Fotal claims from Part 1 6b. Taxes and certain other debts you owe the	
6b. Taxes and certain other debts you owe the	
government 6b. <sub>\$</sub>	
6c. Claims for death or personal injury while you were Intoxicated 6c.	<u>.</u>
6d. Other. Add all other priority unsecured claims.  Write that amount here.  6d. + \$	
6e. <b>Total.</b> Add lines 6a through 6d. 6e.	
Total claim	
Fotal claims 6f. Student loans 6f.	
St. Student leans	
Fotal claims  6f. Student loans  6f. \$  From Part 2  6g. Obligations arising out of a separation agreement  or divorce that you did not report as priority	
Fotal claims  6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  6h. Debts to pension or profit-sharing plans, and other	

Case 19-60050-6-dd Doc 11 Filed 01/28/19 Entered 01/28/19 13:12:07 Page 22 of 48 Document Fill in this information to identify your case: Robert William Tecler Debtor Debtor 2 Middle Name Last Name (Spouse If filing) First Name w. United States Bankruptcy Court for the: Northern District of New York 19-60050-6 Case number ☐ Check if this is an (If known) amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. State what the contract or lease is for Person or company with whom you have the contract or lease 2.1 Name Number Street ZIP Code City State 2.2 Name Number Street ZIP Code City State 2.3 Name Number Street ZIP Code City State 2.4 Name Number Street City State ZIP Code 2.5 Name

ZIP Code

City

Number

Street

State

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Debtor 1

Robert William Tecler

Middle Name First Name

Last Name

Case number (if known) 19-60050-6

	Person o	r company	with w	hom you	have the co	ntract or I	ease	What the contract or lease is for
2 <u>2</u>								
•	Name			_				_
	Number	Street						<del>_</del>
	City			State	ZIP Code	•		_
<u>2</u>							1.44. W	The second secon
. •	Name		·					_
	Number	Street						_
	City			State	ZIP Code		<del></del>	_
2	•		-			Copper in		Commence of the commence of th
	Name							<del>-</del>
	Number	Street			_		<del></del> -	_
	City	<del></del> -		State	ZIP Code			<del>-</del>
2						-15	e e e e e e e e e e e e e e e e e e e	
2	Name							<del>_</del>
	Number	Street	_	<u> </u>				<u> </u>
	City			State	ZIP Code			_
	City		÷	State	ZIP Code			and the second of the second o
2	Name							
	Number	Street						<del>_</del>
		211991			<u> </u>			<u>_</u>
	City			State	ZIP Code	-		and the control of the
2	Name							_
	Name							_
	Number	Street						
	City			State	ZIP Code			
2								_
	Name							
	Number	Street				-		<u> </u>
	City			State	ZIP Code			_
2					••		•	and the second of the second o
	Name						<del></del>	_
	Number	Street						<del>_</del>

City

State

ZIP Code

· Case 19-60050-6-dd			red 01/28/19 13:12:07	Desc Main
Fill in this information to identify you	• •	Page 24 (	of 48	
Debtor 1 Robert William Tecler				
First Name	Middle Name Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the: North	nern District of New York			
Case number 19-60050-6				
(If known)				Check if this is ar amended filing
				amended ming
Official Form 106H				
Schedule H: Your C	odebtors			12/15
Codebtors are people or entitles who are filing together, both are equally resand number the entries in the boxes or case number (if known). Answer every	sponsible for supplying correct the left. Attach the Additionations question.	et information. If n	nore space is needed, copy the age. On the top of any Additional	Additional Page, fill it out,
<ol> <li>Do you have any codebtors? (If yo</li> <li>No</li> </ol>	u are filing a joint case, do not lis	st either spouse as	s a codebtor.)	
☐ Yes				
2. Within the last 8 years, have you !				territories include
Arizona, California, Idaho, Louisiana	ı, Nevada, New Mexico, Puerto I	Rico, Texas, Wash	ington, and Wisconsin.)	
No. Go to line 3.  Yes. Did your spouse, former sp	ouse, or legal equivalent live wit	th you at the time?		
□ No		•		
Yes. In which community sta	ite or territory did you live?	·	Fill in the name and current addre	ss of that person.
Name of your spouse, former spouse	a, or legal equivalent			
Number Street	<del></del>	<u> </u>		
City	State	ZIP Code		
<ol> <li>In Column 1, list all of your codeb shown in line 2 again as a codebt Schedule D (Official Form 106D), Schedule E/F, or Schedule G to fil</li> </ol>	or only if that person is a guar Schedule E/F (Official Form 10	rantor or cosigne	r. Make sure you have listed the	creditor on
Column 1: Your codebtor			Column 2: The creditor to	whom you owe the debt
			Check all schedules that a	pply:
3.1			D Schedule D, line	
Name			Schedule E/F, line	
Number Street		. =	Schedule G, line	_
City	State	ZIP Code		
3.2			Schedule D, line	
Name			Schedule E/F, line	<del></del>
Number Street			Schedule G, line	<u> </u>
City	State	ZIP Code	· · · · · · · · · · · · · · · · · · ·	
3.3			Cabadula D. Bas	
Name			Schedule D, line	
Number Street			Schedule G, line	
City	State	ZIP Code		<del></del>
77 <b>4</b>	State	2000		Wiley and a constraint of the

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Debtor 1

Robert William Tecler First Name

Middle Name

Last Name

Case number (if known) 19-60050-6

Column 1:	Your codebtor			Column 2: The creditor to whom you owe the deb
				Check all schedules that apply:
]				
Name				Schedule D, line
		,		Schedule G, line
Number	Street			a screene o, me
City		State	ZIP Code	
				_ Schedule D, line
Name				Schedule E/F, line
Number	Street			Schedule G, line
<del></del>			710.0.4	_
City		State	ZIP Code	and the second s
Name	·····	<del></del>		Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
City	<del></del>	State	ZIP Code	-
			·	<b>-</b>
Name				Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
				_
Name				Schedule E/F, line
Number	Street		<del></del> ·-	Schedule G, line
140111561	2004			
City	•	State	ZIP Code	
J				_ Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	_
]		Oligia	Ell Code	
Name			*	Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
] "				_
Name				Schedule E/F, line
Number	Street			Schedule G, line
HANNE	Gueet			
City		State	ZIP Code	_

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Debtor 1

Robert William Tecler First Name

Last Name

Case number (if known) 19-60050-6

		For D	ebtor 1	For Debtor 2 or non-filing spouse			
Copy line 4 here	4.	\$ <u>;</u>	3,466.00	\$			
5. List all payroll deductions:							
5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$			
5b. Mandatory contributions for retirement plans	5b.	\$ \$	0.00	\$			
	5c.	\$	0.00	\$			
5c. Voluntary contributions for retirement plans	5d.	\$	0.00	\$			
5d. Required repayments of retirement fund loans	5a.	Ψ	0.00	\$			
5e. Insurance	5f.	φ	0.00	\$	_		
5f. Domestic support obligations		Ψ	0.00	\$ \$			
5g. Union dues	5g.	\$		·	_		
5h. Other deductions. Specify:	5h.	+\$	0.00	+ \$	_		
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	0.00	\$	_		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,466.00	\$	_		
8. List all other income regularly received:							
8a. Net income from rental property and from operating a business, profession, or farm							
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•	0.00	s 0.0	n		
monthly net income.	8a.	\$		\$	<u></u>		
8b. Interest and dividends	8b.	\$	0.00	\$	_		
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	nt						
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8¢.	\$	0.00	\$	_		
8d. Unemployment compensation	8d.	\$	0.00	\$	_		
8e. Social Security	8e.	\$	0.00	\$	_		
8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$	0.00	\$	<del></del>		
8g. Pension or retirement income	8g.	æ	0.00	¢			
·	•	. J	•	Ψ <u></u>	_		
8h. Other monthly income. Specify:	8h.		0.00	_+\$	_		
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	ᆗ		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	. \$	3,466.00	<b>-</b>	_]=	\$ <u>3,466.0</u>	<u>0</u>
11. State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, y friends or relatives.	our o	depende					
Do not include any amounts already included in lines 2-10 or amounts that are	not a	ıvailable	to pay expens				
Specify:				<del>_</del>	11. +	\$	_
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S				•	12.	\$ 3,466.0 Combined monthly income	_
13. Do you expect an increase or decrease within the year after you file this f	form	?					
Yes. Explain:							

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Fill in this information to identify t	our case:					
Debtor 1 Robert William Te						
First Name Debtor 2	Middle Name L	ast Name				
(Spouse, if filing) First Name		ast Name				
United States Bankruptcy Court for the: N	lorthern District of New York					
Case number 19-60050-6	<u> </u>			Check if t	his is: iended filing	
		<del></del>		A supp	olement showing post	
OSS -1-1 Farmer 4001					e as of the following d	ate:
Official Form 106I	I			ММ / С	DD / YYYY	4014 F
Schedule I: You						12/15
Be as complete and accurate as posupplying correct information. If you from separated and your spouseparate sheet to this form. On the	ou are married and not filin se is not filing with you, do top of any additional page	g jointly, and your o not include infor	r spouse is mation ab	i living with y out your spo	/ou, include informatio -use. If more space is n	n about your spouse. leeded, attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-fi	ling spouse
If you have more than one job,			ernaparanama emokkowa islokrikiki			
attach a separate page with information about additional employers.	Employment status	Employed Not employed	i		☐ Employed ☐ Not employed	
Include part-time, seasonal, or self-employed work.		045 Манала	_			
Occupation may include student or homemaker, if it applies.	Occupation	Office Manage		•	·	
	Employer's name	S & G Transpo	ort of Fult	on Co., LL		<del></del>
	Employer's address	15 Division Str	eet		Number Street	
			<u> </u>		<del></del>	
		Gloversville N	Y 1207	8		
		City	State ZIP	Code	City	State ZIP Code
	How long employed there	e? 3 years			3 years	
Part 2: Give Details About	: Monthly Income				<u>.                                    </u>	
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse he below. If you need more space, a	ave more than one employer	, combine the infor				
			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	<b></b>
<ol><li>List monthly gross wages, sal deductions). If not paid monthly,</li></ol>			2. \$	3,466.00	\$	
3. Estimate and list monthly over	rtime pay.		3. +\$	0.00	+ \$	٦
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$	3,466.00	\$	

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Fill in this information to identify your case:			
Debtor 1 Robert William Tecler	Observativity the	_ 1	
First Name Middle Name Last Name	Check if thi		
Debtor 2 (Spouse, If filing) First Name Middle Name Last Name	An ame	nded filing ement showing postp	netition chanter 13
United States Bankruptcy Court for the: Northern District of New York		es as of the following	
Case number 19-60050-6	MM / DD	7 YYYY	
(If known)			
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are fillinformation. If more space is needed, attach another sheet to this form (if known). Answer every question.			
Part 1: Describe Your Household			
1. Is this a joint case?			
<ul><li>✓ No. Go to line 2.</li><li>☐ Yes. Does Debtor 2 live in a separate household?</li></ul>			
□ No			
☐ Yes, Debtor 2 must file Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.	***************************************	
2. Do you have dependents?	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and  Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents'	Daughter	<u>8</u>	☑ No □ Yes
names.			□ No
		<del></del>	Yes
			□ No
		· · · · · · · · · · · · · · · · · · ·	☐ Yes
			□ No
			☐ Yes
			□ No □ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?  No Yes  Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you a	re using this form as a suppler	nent in a Chanter 13 o	ase to report
expenses as of a date after the bankruptcy is filed. If this is a supplemental applicable date.			
Include expenses paid for with non-cash government assistance if you	know the value of		
such assistance and have included it on Schedule I: Your Income (Office	•	Your expe	nses
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	first mortgage payments and	4. \$	900.00
If not included in line 4:			0.00
4a. Real estate taxes		4a. \$	0.00
4b. Property, homeowner's, or renter's insurance		4b. \$	0.00
4c. Home maintenance, repair, and upkeep expenses		4c. \$	250.00
4d. Homeowner's association or condominium dues		4d. \$	0.00

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Debtor 1

Robert William Tecler

irst Name Middle Name Last Name

Case number (#known) 19-60050-6

			Your expe	nses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
		J.		
6.	Utilities:	<b>0</b>	œ	250.00
	6a. Electricity, heat, natural gas	6a.	Ф	25.00
	6b. Water, sewer, garbage collection	6b.	Ф	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	ъ <u></u>	0.00
	6d. Other. Specify:	6d.	<b>\$</b>	250.00
7.	Food and housekeeping supplies	7.	\$	
8.	Childcare and children's education costs	8.	\$	100.00
9.	Clothing, laundry, and dry cleaning	9.	\$	0.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	0.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	0.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	75.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
10.	Specify:	16.	\$	0.00
17.	installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: 0	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	10.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1 Robert William Tecler Case number (#	<sub>known)</sub> 19-60(	)50-6
21. Other. Specify:	21. +	\$
22. Calculate your monthly expenses.	W-141-1	
22a. Add lines 4 through 21.	22a. §	1,950.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. §	<b>5</b>
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. §	1,950.00
	lum-rorrem	Annual
23. Calculate your monthly net income.		2.466.00
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,466.00
23b. Copy your monthly expenses from line 22c above.	23b	\$1,950.00
23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	23c.	\$1,516.00
24. Do you expect an increase or decrease in your expenses within the year after you file this form?		
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
₩ No.		
Yes. Explain here:		

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B6 Declaration (Official Form 6 - Declaration) (12/07)

ln re	Robert W. Tecler	
	Debtor	

Case No.	19-60050-6	
,	(if known)	

### **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the my knowledge, information, and belief.	e foregoing summary and schedules, consisting of sheets, and that they are true and correct to	the best of
Date _1/21/2019	Signature:	
Date	Signature:(Joint Debtor, if any)	
	[If joint case, both spouses must sign.]	
	[11 John Care, Both spourse Inight starts]	
DECLARATION AND SIGNATUL	RE OF NON-ATTOPNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)	
the debtor with a copy of this document and the notices and i promulgated pursuant to 11 U.S.C. § 110(h) setting a maxim	toy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have become fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximal representation and fee from the debtor, as required by that section.	een
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)	
If the bankruptcy petition preparer is not an individual, state who signs this document.	e the name, title (if any), address, and social security number of the officer, principal, responsible person, or	or partner
Address		
X	Date	
Names and Social Security numbers of all other individuals	who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an indivi	/idual:
If more than one person prepared this document, attach add	litional signed sheets conforming to the appropriate Official Form for each person.	
18 U.S.C. § 136.	sions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S	
•	LTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP	
I, the[the partnership ] of the read the foregoing summary and schedules, consisting of knowledge, information, and belief.	e president or other officer or an authorized agent of the corporation or a member or an authorized agent of the corporation or a member or an authorized age [corporation or partnership] named as debtor in this case, declare under penalty of perjury that sheets (Total shown on summary page plus 1), and that they are true and correct to the best of	gent of the at I have of my
Date		
	Signature:	
	[Print or type name of individual signing on behalf of debtor.]	
	poration must indicate position or relationship to debtor.]	
	erry: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.	

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Fill in this in	formation to ide	ntify your case:		
Debtor 1	Robert Willian	n Tecler		
·	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo 19-60050-6 (If known)	r the: Northern District of N	ew York	

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

information. Fill out all of your schedules first; then complete the information on this form. If you are filing amend your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	led schedules after you file
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B	\$398,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$0.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 398,000.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	····· + \$ 0.00
Your total liabilitie	\$ 1,182,000.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,466.00
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ 1,950.00
ting the second of the second	· · · · · · · · · · · · · · · · · · ·

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Debtor 1

Case number (# known) 19-60050-6 Robert William Tecler

6. Are you ming for bankruptcy	under Chapters 7, 11, or 13?					
☐ No. You have nothing to rep ☑ Yes	<ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>✓ Yes</li> </ul>					
. What kind of debt do you hav	6?	k international programme and a second and as	and the state of t			
Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
Your debts are not primar this form to the court with you	ily consumer debts. You have nothing to report on this part our other schedules.	of the form. Check this box an	od submit			
From the Statement of Your C Form 122A-1 Line 11; OR, Form	Current Monthly Income: Copy your total current monthly income 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$3,466.00			
ч г	CONTRACTOR OF THE CONTRACTOR O	дедовам (и тимев, т совмотоворого от техного коллентуру то на	udadi diddida. Mhilm kun su sirii sirii diddiddiddiddiga e c akk e 194			
. Copy the following special ca	tegories of claims from Part 4, line 6 of Schedule E/F:					
. Copy the following special ca	tegories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	Total claim				
From Part 4 on Schedule E/		Total claim				
	F, copy the following:	Total claim				
From Part 4 on Schedule E/ 9a. Domestic support obligation	F, copy the following:					
From Part 4 on Schedule E/2  9a. Domestic support obligation  9b. Taxes and certain other det	F, copy the following: as (Copy line 6a.)	\$0.00				
From Part 4 on Schedule E/2  9a. Domestic support obligation  9b. Taxes and certain other det	F, copy the following:  Is (Copy line 6a.)  Ots you owe the government. (Copy line 6b.)  It injury while you were intoxicated. (Copy line 6c.)	\$0.00 \$0.00				
From Part 4 on Schedule E/s  9a. Domestic support obligation  9b. Taxes and certain other det  9c. Claims for death or personal  9d. Student loans. (Copy line 6)	F, copy the following:  as (Copy line 6a.)  at you owe the government. (Copy line 6b.)  at injury while you were intoxicated. (Copy line 6c.)  f.)  separation agreement or divorce that you did not report as	\$ 0.00 \$ 0.00 \$ 0.00				
9a. Domestic support obligation 9b. Taxes and certain other det 9c. Claims for death or persona 9d. Student loans. (Copy line 6i 9e. Obligations arising out of a priority claims. (Copy line 6i	F, copy the following:  as (Copy line 6a.)  at you owe the government. (Copy line 6b.)  at injury while you were intoxicated. (Copy line 6c.)  f.)  separation agreement or divorce that you did not report as	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00				

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Hall in this information to identify	your case;	Barranda (Santa)			nly as directed in th	is form and in
Debtor: Robert William Tec	ler			Form 122A-1Sup	0)	
First Name	Miriota Name	Last Name	[	☑ 1. There is no p	presumption of abuse	ı.
Debtor 2 (Spouse, if filing) First Name	Afidele Name	Last Nøme	[		on to determine if a p	
United States Bankruptcy Court for the:	Northern District of New Y	ork (			s will be made under Calculation (Official F	
Case number 19-60050-6		-	(		Fest does not apply n tary service but it cou	
(I M Gair)	·	·	J L			end apply later.
			Į	☐ Check if this i	s an amended filin	g
Official Form 122A-1	<del></del>					
<b>Chapter 7 Statem</b>	ent of Your	<b>Current Mo</b>	nthly	/ Income	!	12/15
Be as complete and accurate as pospace is needed, attach a separate additional pages, write your name do not have primarily consumer de Abuse Under § 707(b)(2) (Official F	sheet to this form. Incl and case number (if kno bts or because of quali	ude the line number to own). If you believe that fying military service, c	which the you are complete a	additional inform exempted from a	nation applies. On t presumption of abu	he top of any ise because you
Calculate Four Cliff	ent monthly income			<del></del>		
1. What is your marital and filing  Not married. Fill out Column  Married and your spouse i	n A, lines 2-11.		inne 2 11			
				, .		
Married and your spouse i	-			4 4 17 (	2.44	•
Living separately or a under penaity of perjury	usehold and are not leg re legally separated. Fill / that you and your spous for reasons that do not in	out Column A, lines 2-1 e are legally separated u	1; do not fi Inder nont	ill out Column B. B pankruptcy law tha	y checking this box, t t applies or that you a	
Fill in the average monthly inc bankruptcy case. 11 U.S.C. § August 31. If the amount of your Fill in the result. Do not include income from that property in one	101(10A), For example, if monthly income varied d any income amount more	you are filing on Septem uring the 6 months, add than once. For example	ber 15, the the income if both sp	e 6-mcnth period v e for all 6 months a ouses own the ser	vould be March 1 thro and divide the total by	ough y 6.
	,		•	Column A	Column 8	
				Debtor/f	Debter 2 of non-filing spouse	
<ol><li>Your gross wages, salary, tips (before all payroll deductions).</li></ol>		id commissions		\$ 2,500	\$	
Allmony and maintenance pay Column B is filled in.	ments. Do not include pa	ayments from a spouse it	:	\$0	\$	
4. All amounts from any source voluments, in- from an unin arried partner, men and roommates, include regular filled in. Do not include payment	ciuding child support. In thers of your household, t contributions from a spet	nclude regular contribution your dependents, parents	ns 3,	\$0	\$	
5. Net income from operating a loor farm		Debtor 1 Debtor 2	٠.			
Gross receipts (before all deduc	lions)	\$ <b>\$</b>		· · · · · · · · · · · · · · · · · · ·	-	
Ordinary and necessary operation	ig expenses	- \$ \$				
Net monthly income from a business.	nass, profession, or fann	sn, s	Copy hero ನಿ	\$ 0	\$	•
6. Net income from rental and of Gross receipts (before all deduc		Debtor 1 Debtor 2				
Ordinary and necessary operation	•	\$ \$				
Net monthly income from rental	or other real property	s 0 s	Copy here	ş0	<b>s</b>	
7 Interest, dividends, and royalt	ies ···	**************************************		s0	\$	
بتوأسيناه كيدوية الاستان الاستيار		or a service of the s	acional minutes of the total distance			de his selection come a second a second of the selection

# Case 19-60050-6-dd Doc 11 Filed 01/28/19 Entered 01/28/19 13:12:07 Desc Main Document Page 35 of 48

benefit under the Social Security Act.  Income from all other sources not listed above. Specify the source and amount.  Do not incide any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  Total amounts from separate pages, if any.  Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Calculate your current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from tine 11.  Multiply by 12 (the number of months in a year).  12b. The result is your annual income for this part of the form.  Calculate the median family income for this part of the form.  Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  New York  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the ceparate instructions for this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Go to Part 3 and fill out Form 122A-2.  Signature of Debtor 1  Date 01/21/2019  Date 01/21/2019  Date 01/21/2019	or 1	Robert William Tecler First Ganle Middle Name Last Name		Case number (# known)_	19-60050-6	<del></del>
Description for amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you.  S For your spouse.  S Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the lotal below.  Total amounts from separate pages, if any.  Calculate your total current monthly Income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Calculate your total current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11.  Multiply by 12 (the number of months in a year).  12b. The result is your annual income for this part of the form.  Calculate the median family income for your state and size of household.  Fill in the number of people in your isoushold.  Fill in the number of people in your isoushold.  Fill in the number of people in your isoushold.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3 and fill out Form 122A-2.  Stignature of Debtor 1  Date, 01/21/2019  Date  Signature of Debtor 1  Date, 01/21/2019  Date					Debtor 2 or	•
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For your spouse	Do not	enter the amount if you contend that the amour	nt received was a benefit	<b></b>	·	-
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Signature of Debtor 1  Date 01/21/2019  Date	nțt 3:	Sign Below				
Signature of Debtor 1   Signature of Debtor 2		By signing here, I declare under canalty of he	rjury that the information on t	his statement and in any	attachments is true	and correct.
Date		× /////	1	c		
		Signature of Cabtor 1	<del></del>	Signature of Debtor 2		
		Pate 01/21/2019		Data		
		MM / DD /YYYY		MM / DD / YYY	<del>/</del>	
if you checked line 14b, fill out Form 122A-2 and file it with this form.			•			

Case 19-60050-6-dd Doc 11 Filed 01/28/1	9 Entered 01/28/19 13:12:07 Desc Mage 36 of 48	⁄lain				
Deblor 1 Robert William Tecler						
First Name Middle Name Last Name  Debtor 2						
(Spouse, if filing) First Name Middle Name Last Name						
United States Bankruptcy Court for the: Northern District of New York						
Case number (If known) 19-60050-6						
	☐ Check if this is an amended filing					
Official Form 122A—1Supp						
Statement of Exemption from Presumptio	n of Abuse Under § 707(b)(2) 12/1	.5				
File this supplement together with Chapter 7 Statement of Your Current Monthly exempted from a presumption of abuse. Be as complete and accurate as possible exclusions in this statement applies to only one of you, the other person should required by 11 U.S.C. § 707(b)(2)(C).	e. If two married people are filing together, and any of the					
art 1: Identify the Kind of Debts You Have		_				
Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S personal, family, or household purpose." Make sure that your answer is consistent w Individuals Filing for Bankruptcy (Official Form 101).	.C. § 101(8) as "incurred by an individual primarily for a lith the answer you gave at line 16 of the Voluntary Petition for					
☐ No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is submit this supplement with the signed Form 122A-1.	no presumption of abuse, and sign Part 3. Then					
☑ Yes. Go to Part 2.						
art 2: Determine Whether Military Service Provisions Apply to You						
Determine Whether minitary derived Freviations Apply to Fed		-				
Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?						
☑ No. Go to line 3.		!				
Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).	performing a homeland defense activity?	*** - ********************************				
☐ No. Go to line 3.		l				
☐ Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, Then submit this supplement with the signed Form 122A-1.	There is no presumption of abuse, and sign Part 3.					
Are you or have you been a Reservist or member of the National Guard?						
☑ No. Complete Form 122A-1. Do not submit this supplement.						
Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32-U.S.C. § 901(1).						
No. Complete Form 122A-1. Do not submit this supplement.						
Yes. Check any one of the following categories that applies:						
I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1,	A 100 mm				
☐ I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on	check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM				
which is fewer than 540 days before I file this bankruptcy case.	Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The					
☐ I am performing a homeland defense activity for at least 90 days.	exclusion period means the time you are on active duty or are performing a homeland defense activity, and for					
☐ I performed a homeland defense activity for at least 90 days,	540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).					
ending on, which is fewer than 540 days before I file this bankruptcy case.	If your exclusion period ends before your case is closed,					

you may have to file an amended form later.

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Debtor 2	First Name	Middle Name	Lesi Name			
pouse, if filing	J) Firet Name	Middle Name	Last Name			
ited States	Bankruptcy Court for the:	District	of			
se number		<u> </u>		,		Check if this is an
'known)						amended filing
fficial	Form 107					
tatem	ent of Finan	ıcial Affaiı	rs for Indiv	iduals Filing for E	<b>Bankruptcy</b>	04/1
as compl	ete and accurate as po	ssible. If two marr	led people are filing	together, both are equally resp	onsible for supplyin	g correct
ormation.	If more space is need	ed, attach a separa	ate sheet to this for	m. On the top of any additional p	pages, write your na	me and case
mber (if kr	nown). Answer every q	uestion.				
Part 1:	Give Details About '	Your Marital Sta	tus and Where Y	ou Lived Before		
. Mibatic	your current marital st	estuc 2				
_	•	atus r				
Marr Marr						
Not i	married					
□ No	he last 3 years, have you					
☐ No ☑ Yes.			years. Do not include  Dates Debtor 1			Dates Debtor 2 lived there
□ No ☑ Yes.	List all of the places you		years. Do not include	where you live now.		lived there
□ No ☑ Yes.	List all of the places you		years. Do not include  Dates Debtor 1	where you live now.  Debtor 2:		
□ No ☑ Yes.	List all of the places you		years. Do not include  Dates Debtor 1	Debtor 2:  Same as Debtor 1		lived there
□ No ☑ Yes.	List all of the places you		years. Do not include  Dates Debtor 1  lived there	Debtor 2:		lived there
☐ No ☑ Yes.	List all of the places you		years. Do not include  Dates Debtor 1 lived there	Debtor 2:  Same as Debtor 1		lived there  Same as Debtor  From
□ No ☑ Yes.	List all of the places you		years. Do not include  Dates Debtor 1 lived there	Debtor 2:  Same as Debtor 1		lived there  Same as Debtor  From
☐ No ☑ Yes.	List all of the places you btor 1:		years. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street	tate ZIP Code	lived there  Same as Debtor  From
No No Pe	List all of the places you btor 1:	u lived in the last 3 y	years. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street	tate ZIP Code	lived there  Same as Debtor  From
No Yes.	List all of the places you btor 1:	u lived in the last 3 y	years. Do not include  Dates Debtor 1 lived there  From  To	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City S	tate ZiP Code	Ived there  Same as Debtor  From  To  Same as Debtor
No No De	List all of the places you btor 1:	u lived in the last 3 y	years. Do not include  Dates Debtor 1 lived there  From To  Frem	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City S	tate ZIP Code	Iived there  Same as Debtor  From  To  Same as Debtor  From  From
No No De	List all of the places you btor 1:  umber Street	u lived in the last 3 y	years. Do not include  Dates Debtor 1 lived there  From  To	Same as Debtor 1  Number Street  City Si	tate ZIP Code	lived there  ☐ Same as Debtor  From  To  ☐ Same as Debtor
No No De	List all of the places you btor 1:  umber Street	u lived in the last 3 y	years. Do not include  Dates Debtor 1 lived there  From To  Frem	Same as Debtor 1  Number Street  City Si	tate ZIP Code	Iived there  Same as Debtor  From  To  Same as Debtor  From
No N	List all of the places you btor 1:  umber Street	u lived in the last 3 y	years. Do not include  Dates Debtor 1 lived there  From To  Frem	Same as Debtor 1  Number Street  City S  Number Street		Iived there  Same as Debtor  From  To  Same as Debtor  From  From
No No Yes.	List all of the places you btor 1:  umber Street	u lived in the last 3 y	years. Do not include  Dates Debtor 1 lived there  From To  Frem	Same as Debtor 1  Number Street  City S  Number Street	tate ZIP Code	Ilived there  Same as Debtor  From  To  Same as Debtor  From
No N	List all of the places you btor 1:  umber Street  ity  the last 8 years, did you	u lived in the last 3 y State ZIP Code  State ZIP Code	pouse or legal equi	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City S  Number Street  City S  Valent in a community property	tate ZIP Code	Same as Debtor From To Same as Debtor From To Community property
No No Yes.  De No No Yes.	List all of the places you btor 1:  umber Street  ity  the last 8 years, did you	u lived in the last 3 y State ZIP Code  State ZIP Code	pouse or legal equi	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City Si  Same as Debtor 1  Number Street	tate ZIP Code	Same as Debtor From To Same as Debtor From To Community property
No No Yes.  De No	List all of the places you btor 1:  umber Street  ity  the last 8 years, did you	State ZIP Code  State ZIP Code  u ever live with a szona, California, lua	pates Debtor 1 lived there  From To To To pouse or legal equition, Louisiana, Neva	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City Si  Number Street  City Si  Number Street	tate ZIP Code	Iived there  Same as Debtor From To  Same as Debtor From To

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ebi	tor 1 Robert William Tecler First Name Middle Name Last?	Name	Case nu	mber (if known) 19-60050-6	
4.	Did you have any income from employmen Fill in the total amount of income you received If you are filing a joint case and you have inco	d from all jobs and all busi	nesses, including part-tir	ne activities.	ndar years?
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
	From January 1 of current year until	Wages, commissions,	\$	Wages, commissions,	\$
	the date you filed for bankruptcy:	bonuses, tips  Operating a business	*	bonuses, tips  Operating a business	·
	For last calendar year:	Wages, commissions, bonuses, tips	m	Wages, commissions, bonuses, tips	e e
	(January 1 to December 31,	Operating a business	Φ	Operating a business	Φ
	For the calendar year before that:	☐ Wages, commissions,	•	☐ Wages, commissions,	
	(January 1 to December 31,	bonuses, tips  Operating a business	\$	bonuses, tips  Operating a business	\$
	gambling and lottery winnings. If you are filing List each source and the gross income from a No				
	Yes. Fill in the details.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below,	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until		\$		- \$
	the date you filed for bankruptcy:		\$	· · · · · · · · · · · · · · · · · · ·	\$
	·	<del></del>	\$		· \$
	For last calendar year:		\$		. \$
	(January 1 to December 31,)		\$	<del></del>	· \$
		•	\$	<u></u>	- \$
	with the second	·		•	
	For the calendar year before that:		\$		\$
	(January 1 to December 31,)		\$		\$
			<b>V</b> .	•	35

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Debtor 1	Robert William Te		Last Name		Case	number (# known) 19-60050-6	
Part 3:	-		Made Befor	e You Filed	for Bankruptcy		
	<u> </u>				<del></del>		
6. Are e	either Debtor 1's or Deb	or 2's debt	s primarily co	onsumer debt	s?		
□ N	lo. Neither Debtor 1 no	r Debtor 2 I dual primari	has primarily ly for a person	consumer de al, family, or h	bts. Consumer debts an ousehold purpose."	e defined in 11 U.S.C. § 101	(8) as
	During the 90 days b	efore you fil	ed for bankrup	otcy, did you pa	ay any creditor a total of	\$6,425* or more?	
	No. Go to line 7.						
	total amount	vou paid th	at creditor. Do	not include p	\$6,425* or more in one a ayments for domestic su nents to an attorney for t	or more payments and the apport obligations, such as his bankruptcy case.	
						fter the date of adjustment.	
<b>⊠</b> ∨	es. Debtor 1 or Debtor :	2 or both h	ave primarily	consumer de	bts.		
					sy any creditor a total of	\$600 or more?	
	☑ No. Go to line 7.						
	creditor. Do	not include	payments for	domestic supp	\$600 or more and the to ort obligations, such as ey for this bankruptcy ca		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
					\$	\$	☐ Mortgage
	Creditor's Name						☐ Car
	Number Street						Credit card
							Loan repayment
							Suppliers or vendors
	City	State	ZIP Cude			•	☐ Other
					\$	\$	☐ Mortgage
	Creditor's Name						Car
	Number Street		•				Credit card
							Loan repayment
							Suppliers or vendors
	City	State	ZIP Code				Other
					\$	\$	☐ Mortgage
	Creditor's Name						Car
	Number Street	<del></del>					☐ Credit card
	- Lander Co. Mar						Loan repayment
			<u></u>				☐ Suppliers or vendors
	City	State	ZIP Code				Other
	-						

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Debtor 1	Robert William Tecler			Case number (if known)	19-60050-6
	First Name Middle Name	Last Name			
Inside corpoi agent	n 1 year before you filed for ban ors include your relatives; any gen rations of which you are an officer , including one for a business you as child support and alimony.	eral partners; relatives of an , director, person in control,	y general partners; p or owner of 20% or t	artnerships of whic more of their voting	h you are a general partner; securities; and any managing
	ues. List all payments to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
ī	Insider's Name		_ \$	\$	:
Ī	Number Street		_		:
- î	City State	ZIP Code	-		
			\$	\$	
_	Insider's Name  Number Street		_		
-			-		:
ī	City State	ZIP Code			
an ins	n 1 year before you filed for ban sider? de payments on debts guaranteed		y payments or trans	fer any property o	n account of a debt that benefited
Ø Ne □ Ye	o es. List all payments that benefite	d an insider.			
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
	Insider's Name			_ \$	
	Number Street		_		
	City State	ZIP Code	_		
	Insider's Name		<u> </u>	_ \$	
	maido a Hailla				
	Number Street	m	_		
		_			

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			Case numb	Der (if known)		
Firsi Name Middle Name	Last Name					
4: Identify Legal Action						·
thin 1 year before you filed f						
t all such matters, including pe d contract disputes.	rsonal injury cases, sm	ali ciaims actions, div	rorces, collection sui	its, paternity ac	uons, supp	ion or custody modificat
No Yes. Fill in the details.						
Yes. Fill in the details.	Nature of	the cose	Court or agen	CV		Status of the case
	Nation of	·	Octil of agen	٠,		
Case title			Court Name			Pending
Case tino			Court Name			☑ On appeal
			Number Street			Concluded
_						
Case number	<del> </del>		City	State ZI	P Code	
			u i			
						—— Pending
Case title	<del>.</del>		Court Name			On appeal
			NT-1			Concluded
			Number Street			Collegada
Case number	<del></del>		City	State ZI	P Code	
			2.17			
Yes. Fill in the information be	low.					
		Describe the property	<i>!</i>		Date	Value of the property
	!					
Creditor's Name				-		_ \$
Number Street		Explain what happen	ed			
		☐ Property was re	enossessed.			
		☐ Property was fo				
		☐ Property was g				
City	State ZIP Code	☐ Property was a	ttached, seized, or l	evied.		
		Describe the property	y		Date	Value of the proper
	ſ					•
	:					\$
Creditor's Name	:			_		_
Organia a realine						
Number Street						
1,4,1,1,2		Explain what happen	ed			
_ <del></del>	<u> </u>	Property was re	epossessed.			
		☐ Property was for				
City	State ZIP Code	☐ Property was g	amished.			
Uny	21510 FIL C004	☐ Property was a	ttached, seized, or l			

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tor 1	Robert William Tecler	Case number (if known) 1	J-00000 0	
	First Name Middle Name Las	t Name		
Mith	in 90 days before you filed for bankri	uptcy, did any creditor, including a bank or financial instituti	on, set off any am	nounts from your
acco	ounts or refuse to make a payment be	cause you owed a debt?	•, •• <b>,</b>	
<b>∑</b> i N		•		
	es. Fill in the details.			
			D-4	A
		Describe the action the creditor took	Date action was taken	Amount
c	reditor's Name	<del>-</del>		
				\$
N	lumber Streat	_ '		Φ
_		_		
_	City State ZIP Code	Last 4 digits of account number: XXXX		
G	Sizie 217 Code	Last 4 digits of account florider.		
	du duman hadana waxa dibudun handama	they man any of many purposes in the procession of an arrive	nge for the benefi	t of
with	iln 1 year before you filed for bankrup litors, a court-appointed receiver, a ci	otcy, was any of your property in the possession of an assignated and a state of a state of the control of the	nes for the beileff	·
	• • •			
O Y				
- 1				
art 5:	List Certain Gifts and Contrib	utions		
	<u> </u>			
Withi	in 2 vears before you filed for bankru	ptcy, did you give any gifts with a total value of more than \$	600 per person?	
<b>5</b>				
	Yes. Fill in the details for each gift.			
	res. I ill in the details for sash give			
	Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Describe the gifts		Value
	per person	Describe the gifts		Value
		Describe the gifts		
	per person	Describe the gifts		
	per person	Describe the gifts		\$
P -	per person	Describe the gifts		\$
P -	per person Person to Whom You Gave the Gift	Describe the gifts		\$
P - N	per person Person to Whom You Gave the Gift	Describe the gifts		\$
P - N	Person to Whom You Gave the Gift  Number Street  City State ZIP Code	Describe the gifts		\$
P - N	per person  Person to Whom You Gave the Gift  Number Street	Describe the gifts		\$
P N Č	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you	- - -	the gifts	\$ \$
P N O	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	Describe the gifts  Describe the gifts		\$
P - N - N - N - N - N - N - N - N - N -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you	- - -	the gifts	\$ \$
P - N - N - N - N - N - N - N - N - N -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	- - -	the gifts	\$ \$
F C C F	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	- - -	the gifts	\$ \$
P N O P	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	- - -	the gifts	\$ \$
P N O P	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	- - -	the gifts	\$ \$
P N O P	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	- - -	the gifts	\$ \$
F 6 F	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	- - -	the gifts	\$ \$
P N N N P	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift	- - -	the gifts	\$ \$
P	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift	- - -	the gifts	\$ \$

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Within 2 years before you filed for bankruptcy, did you give any gifts or contrib  No Yes. Fill in the details for each gift or contribution.  Gifts or contributions to charities that total more than \$600  Charity's Name  Charity's Name  Charity's Name  City State ZIP Code  Art 6: List Certain Losses  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  Mo Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has padaims on line 33 of Schedule A/B: Property you consulted about seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street  City State ZiP Code	Case number (if known) 19-60050-6
✓ No	
✓ No	
☐ Yes. Fill in the details for each gift or contribution.         Gifts or contributions to charities that total more than \$600       Describe what you contributed         Charity's Name       Number Street         Number Street       City State ZIP Code         Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?       ✓ No         ☐ Yes. Fill in the details.       Describe any insurance coverage for 1 include the amount that insurance has paciaims on line 33 of Schedule A/B: Proper claims on line 33 of Schedule A/B: Prop	outlons with a total value of more than \$600 to any charity?
Gifts or contributions to charities that total more than \$600  Charity's Name  Number Street  City State ZIP Code  T. 6: List Certain Losses  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  No  Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the include the amount that insurance has particulated the amount that insurance has particulated the insurance of the property of the include the amount that insurance has particulated the insurance of the property of the include the amount that insurance has particulated the insurance of the property of the include and the insurance of the include the amount that insurance of the include	
Charity's Name    Number   Street	
Charity's Name    Number   Street	Date you Value
Number Street  City State ZIP Code  It 6: List Certain Losses  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pactains on line 33 of Schedule A/B: Property you consulted about seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	contributed
Number Street  City State ZIP Code  Tt 6: List Certain Losses  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pactains on line 33 of Schedule AR: Property you lost and how the loss occurred  Within 1 year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	
Number Street  City State ZIP Code  Tt 6: List Certain Losses  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pactains on line 33 of Schedule AR: Property you lost and how the loss occurred  Within 1 year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	<u></u> \$
Tit 7: List Certain Payments or Transfers  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  ✓ No  ☐ Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pactains on line 33 of Schedule A/B: Property you consulted about seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	
Tit 7: List Certain Payments or Transfers  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  ✓ No  ☐ Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pactains on line 33 of Schedule A/B: Property you consulted about seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	<u> </u>
Tit 7: List Certain Payments or Transfers  Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  ✓ No  ☐ Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pactains on line 33 of Schedule A/B: Property you consulted about seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	<b>.</b>
Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pectains on line 33 of Schedule A/B: Property you consulted about seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition?  No Person Who Was Paid  Number Street	
Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pectains on line 33 of Schedule A/B: Property you consulted about seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition?  No Person Who Was Paid  Number Street	
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Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, disaster, or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has packaims on line 33 of Schedule A/B: Property you can be seeking bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys bankruptcy petition preparers, or credit counseling agencies for the Include any attorneys.  Description and value of any property Person Who Was Paid  Number Street	
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disaster, or gambling?  ✓ No  ☐ Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any Insurance coverage for the Include the amount that insurance has pactains on line 33 of Schedule A/B: Property of Schedul	
Within 1 year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for No    Yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	loss lost aid. List pending insurance
Within 1 year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the No Person Who Was Paid  Number Street	orty.
Within 1 year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for No  Yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	<u></u> \$
Within 1 year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for No  Yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	
Within 1 year before you filed for bankruptcy, did you or anyone else acting on you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for No  Yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	
you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies f  No Person Who Was Paid  Number Street	
Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for the large state of t	your behalf pay or transfer any property to anyone
No Yes. Fill in the details.  Description and value of any property  Person Who Was Paid  Number Street	for consider required in your hanksuntay
Person Who Was Paid  Number Street	ior services required in your parisrupicy.
Person Who Was Paid  Number Street	
Person Who Was Paid  Number Street	
Number Street	transfer was
	made
	· · · · · · · · · · · · · · · · · · ·
City State ZIP Code	<del></del>
City State ZIP Code	<u></u> \$
City State AIT CODE	· <del></del>
Email or website address	
Person Who Made the Payment, if Not You	i e

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First Name Middle Name		ase number (if known) 19-00050-0	<del></del>
	Lest Name		
	Description and value of any property transf	erred Date payment or transfer was made	Amount of payment
Person Who Was Paid			•
Number Street		<del></del>	<b>&gt;</b>
rances dieder			\$
	<del></del>		
City State ZIP C	Code		
Email or website address			
Person Who Made the Payment, if Not You			
No Yes. Fill in the details.	Description and value of any property trans	ferred Date payment or transfer was made	Amount of pa
Person Who Was Paid		made	•
Number Street			<b>\$</b>
	<u>_</u>		\$
City State ZIP	Code  pankruptcy, did you sell, trade, or otherwise tran	sfer any property to anyone, other th	\$ nan property
City State ZIP Ithin 2 years before you filed for b Insferred in the ordinary course on Clude both outright transfers and trai	pankruptcy, did you sell, trade, or otherwise tran of your business or financial affairs?  Insters made as security (such as the granting of a second you have already listed on this statement.  Description and value of property	security interest or mortgage on your property interest or mortgage on your property or payments receive	operty).
City State ZIP of thin 2 years before you filed for be ansferred in the ordinary course of the both outright transfers and transfers that No	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs?  nsfers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property of transferred	ecurity interest or mortgage on your pr	operty).
City State ZIP in the 2 years before you filed for burnsferred in the ordinary course of clude both outright transfers and transfers that No Yes. Fill in the details.  Person Who Received Transfer	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs?  nsfers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property of transferred	ecurity interest or mortgage on your property or payments received to be sold in exchange.	operty).
City State ZIP in the 2 years before you filed for burnsferred in the ordinary course of clude both outright transfers and traise not include gifts and transfers that No Yes. Fill in the details.  Person Who Received Transfer	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs?  nsfers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property of transferred	ecurity interest or mortgage on your property or payments received to be sold in exchange.	operty).
City State ZIP of the City State Sta	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs? Insiers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property transferred of tran	ecurity interest or mortgage on your property or payments receiver debts paid in exchange	operty).
City State ZIP of the City State Sta	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs?  Insiers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property of transferred o	ecurity interest or mortgage on your property or payments receiver debts paid in exchange	operty).  d Date tran was mad
City State ZIP of the City State Sta	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs? Insiers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property transferred of tran	ecurity interest or mortgage on your property or payments receiver debts paid in exchange	operty).  d Date tran was mad
City State ZIP in the 2 years before you filed for burnsferred in the ordinary course of clude both outright transfers and traise not include gifts and transfers that No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP in Person's relationship to you	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs? Insiers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property transferred of tran	ecurity interest or mortgage on your property or payments receiver debts paid in exchange	operty).  d Date tran was mad
City State ZIP of the City State Sta	pankruptcy, did you sell, trade, or otherwise transof your business or financial affairs? Insiers made as security (such as the granting of a second you have already listed on this statement.  Description and value of property transferred of tran	ecurity interest or mortgage on your property or payments receiver debts paid in exchange	operty).  d Date tran was mad

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tor 1	Robert William Tecler	t Name	Case number (if kno	<sub>wn)</sub> 19-60050-6	<del></del>
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
With	nin 10 years before you filed for bankr	uptcy, did you transfer any properi	y to a self-settled trus	t or similar device of w	hich you
are	a beneficiary? (These are often called a	asset-protection devices.)			
	No Yes. Fill in the details.				
		Description and value of the prope	rty transferred		Date transfer was made
		en e		<del></del>	#45 Midde
	Name of trust	_			
			****		
 vt 5	List Certain Financial Accoun	ts. Instruments. Safe Deposit	Boxes, and Storag	e Units	***************************************
	hin 1 year before you filed for bankrup				benefit.
	hin 1 year before you filed for bankrup sed, sold, moved, or transferred?	otcy, were any financial accounts t	i ilistruments nera m	your name, or for your	
Inc	lude checking, savings, money marke	t, or other financial accounts; certi	ficates of deposit; sha	ares in banks, credit un	ions,
bro	kerage houses, pension funds, coope	ratives, associations, and other fir	nancial institutions.		
Ø	No				
	Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or	Date account was	Last balance befo
		Lest 4 digits of account number	Instrument	closed, sold, moved, or transferred	closing or transfe
	Name of Financial Institution		☐ Checking	_	\$
	Number Street		Savings	<del></del> _	
	Number Street	_	☐ Money market		
		_	☐ Brokerage		
	City State ZIP Code		☐ Other		
		_ XXXX-	☐ Checking		\$
	Name of Financial Institution		Savings	<del></del>	
	Number Street	-	Money market		
		_	☐ Brokerage		
	City State ZIP Code	_	Other		
	you now have, or did you have within	1 year before you filed for bankru	ptcy, any safe deposit	box or other depositor	y tor
	curities, cash, or other valuables? No				
	Yes. Fill in the details.				
	Yes. Fill in the details.	1411	Susaniha ti	ha aantanta	Do you et
		Who else had access to it?	Describe to	he contents	Do you st have it?
					□ No
	Name of Financial Institution	Name			☐ Yes
	Number Street	Number Street			
	<del></del>				:
		City State ZIP Code	<del></del>		l l
	City State ZiP Code	_			

Official Form 107

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btor 1	Robert William Tecler First Name Middle Name Last	Name	Case number (# known) 19-60050-6	
Have ⊠ÍN		or place other than your home with	in 1 year before you filed for bankruptcy?	
=	o es. Fill in the details.			
<b>□</b> Y	es. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you stil have it?
			1 10 10 10 10 1 1 1 1 1 1 1 1 1 1 1 1 1	□ No
	Name of Storage Facility	Name		☐ Yes
	Number Street	Number Street		:
		CityState ZIP Code	<del></del> .	
	City State ZiP Code	A N		
art 9:	identify Property You Hold	or Control for Someone Else		, ,
. Do y	ou hold or control any property that s	someone else owns? Include any pr	operty you borrowed from, are storing for	;
	old in trust for someone.			
	No Yes. Fill in the details.			
<u> </u>	res. Fin in the details.	Where is the property?	Describe the property	Value
		Titles to the property.		
	Oursels Name			i e
	Owner's Name			4
	Number Street	Number Street		
			<del></del>	
		Die Park 710	Code	:
	City State ZIP Code	City State ZIP		:
art 1	0: Give Details About Environ	mental Information		
		<del></del>		
	purpose of Part 10, the following def			_
haza	<i>ironmental law</i> means any federal, sta ardous or toxic substances, wastes, c uding statutes or regulations controll	or material into the air, land, soil, su	ncerning pollution, contamination, release rface water, groundwater, or other medium s. wastes. or material.	n,
	-	•	ntal law, whether you now own, operate,	<b>0</b> *
Site utili:	reans any location, lacility, or prope ze it or used to own, operate, or utiliz	e it, including disposal sites.	inital law, whether you now own, operate,	or .
	·		dous waste, hazardous substance, toxic	
	stance, hazardous material, pollutant		doug waste, nazardous substanto, toxio	
	all notices, releases, and proceeding		of when they occurred.	
t. Has	any governmental unit notified you th	aat you may be liable or potentially l	iable under or in violation of an environm	ental law?
<b>Ø</b> 1 1	No			
	Yes. Fill in the details.			
		Cararumontal rult	Environmental law, if you know it	Date of notice
		Governmental unit	Puringuitation in all it Aon whom it	Date of Hones
		!		!
1	Name of site	Governmental unit		
		<u></u>		· !
Ī	Number Street	Number Street		
		City State ZIP Code	·	
•		City State ZIP Code		
	City State 7IR Code			

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1	Robert William Tecler	Last Name	Case number (# known) 19-60050-6	<u> </u>
	LIES INSTITUTE (MIDGLE LIBITE			
av	re you notified any governmental ι	unit of any release of hazardous mater	al?	
AÍ.	No			
_	Yes. Fill in the details.			
	reg. I all all the detaile.	Governmental unit	Environmental law, if you know it	Date of notice
		GOTOTINISTICAL AND		
	Name of site	Governmental unit	-	
	Number Street	Number Street	•	••
		City State ZIP Code	-	
	City State ZIP Co	ode		
	Sity Class			
a١	ve you been a party in any judicial	or administrative proceeding under an	y environmental law? Include settlemen	ts and orders.
	No			
3	Yes. Fill in the details.			
		Court or agency	Nature of the case	Status of the case
	Case title	·		Pending
		Court Name		On appe
		Number Street		☐ Conclude
		1,111,111		
	Case number	City State ZIP C	ode .	
ť	11: Give Details About You	ir Business or Connections to An	y Business	
Ni	A sole proprietor or self-empl	ankruptcy, did you own a business or i loyed in a trade, profession, or other a y company (LLC) or limited liability par		any business?
	A partner in a partnership	, 5000, pany (220, 500, 500, 500, 500, 500, 500, 500,	, , ,	
	An officer, director, or manag	ing executive of a corporation		
	An owner of at least 5% of the	e voting or equity securities of a corpo	ration	
ב	No. None of the above applies. G	io to Part 12.		
_		and fill in the details below for each bu	siness.	
		Describe the nature of the busine		n number
	WTR Services LLC		Do not include Social	Security number or ITIN.
	201 Bridge Street	Operation of a Softball Field	Fin: 2 0 _1	7 <u>2 9 9 9 7</u>
	Number Street			
		Name of accountant or bookkeep	er Dates business existe	d
		none	From01/01/2 <u>01</u> 0 T	07/14/2017
		134	From Control	<u> </u>
	City State ZIP C	Code  Describe the nature of the busine	ess Employer Identificatio	n number
	RRTec Properties, LLC		• •	Security number or ITIN.
	Business Name	Rental Property		-
	4432 Route 30		EIN: 2 6 4	2 <u>8 7 3 3 2</u>
	Number Street	Name of accountant or bookkeep	per Dates business existe	ed
		none		
	Amsterdam NY 12	010	From 1/28/2009 T	o present
		Code		

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	Robert William Tecler	C	ase number (if known) 19-60050-6
	First Name Middle Name Last Na	me	
			Employer Identification number
		Describe the nature of the business	Do not include Social Security number or ITIN.
Bus	siness Name		EIN:
N	Alari Marah		<del></del>
Nun	nber Street	Name of accountant or bookkeeper	Dates business existed
			From To present
City	State ZIP Code		10
ithin 2	2 years before you filed for bankrupt	cy, did you give a financial statement to	anyone about your business? Include all financial
	ons, creditors, or other parties.		
No			
Yes.	. Fill in the details below.		
		Date issued	
Nan		MM / DD / YYYY	
71411	110	אווין נטטן אווא	
Nur	mber Street		
_			
_			
City	v State ZIP Code		
City	y State ZIP Code		
City	y State ZIP Code		
City	y State ZIP Code		
City	y State ZIP Code		
12: have inswe	Sign Below  read the answers on this Statementers are true and correct. I understand	of Financial Affairs and any attachment d that making a false statement, conceal result in fines up to \$250,000, or imprise	is, and I declare under penalty of perjury that the ing property, or obtaining money or property by fraud onment for up to 20 years, or both.
12: have	read the answers on this Statementers are true and correct. I understand the correct of the corr	i that making a false statement, conceal	ing property, or obtaining money or property by fraud
12: have inswe	read the answers on this Statementers are true and correct. I understand the correct of the corr	i that making a false statement, conceal	ing property, or obtaining money or property by fraud
have inswer a con 8 U.S	read the answers on this Statementers are true and correct. I understand inection with a bankruptcy case can s.C. §§ 152, 1341, 1519, and 3571.	d that making a false statement, conceal result in fines up to \$250,000, or impriso	ing property, or obtaining money or property by fraud
have inswer a con 8 U.S	read the answers on this Statementers are true and correct. I understand the correct of the corr	d that making a false statement, conceal result in fines up to \$250,000, or imprise	ing property, or obtaining money or property by fraud
have inswencon 8 U.S	read the answers on this Statement are true and correct. I understand inection with a bankruptcy case can s.C. §§ 152,1341,1519, and 3571.	d that making a false statement, conceal result in fines up to \$250,000, or impriso	ing property, or obtaining money or property by fraud
have unswern control 8 U.S	read the answers on this Statement are true and correct. I understant inection with a bankruptcy case can s.C. §§ 152, 1341, 1519, and 3571.	that making a false statement, conceal result in fines up to \$250,000, or imprisonable and the statement of Debtor 2  Date	ing property, or obtaining money or property by fraud
have answern connictions as U.S. Sig	read the answers on this Statement ers are true and correct. I understand the statement of	that making a false statement, conceal result in fines up to \$250,000, or imprisonable and the statement of Debtor 2  Date	ing property, or obtaining money or property by fraud priment for up to 20 years, or both.
have in control 8 U.S. Signature of the state of the stat	read the answers on this Statement ers are true and correct. I understand the statement of	that making a false statement, conceal result in fines up to \$250,000, or imprisonable and the statement of Debtor 2  Date	ing property, or obtaining money or property by fraud priment for up to 20 years, or both.
have answer n control 8 U.S.  Sig	read the answers on this Statement ers are true and correct. I understand mection with a pankruptcy case can s.C. §§ 152-1341, 1519, and 3571.  Insture of Debtor 1  te 21/21/2019  ou attach additional pages to Your S.	that making a false statement, conceal result in fines up to \$250,000, or imprisonable and the statement of Debtor 2  Date	ing property, or obtaining money or property by fraud priment for up to 20 years, or both.
have unsween com 8 U.S.  Sig Date Did you No. 1 Yes	read the answers on this Statement ers are true and correct. I understand the statement of	that making a false statement, conceal result in fines up to \$250,000, or imprisonable and the statement of Debtor 2  Date	ing property, or obtaining money or property by fraud priment for up to 20 years, or both.  uals Filing for Bankruptcy (Official Form 107)?
have answer or control of the contro	read the answers on this Statement ers are true and correct. I understand mection with a pankruptcy case can s.C. §§ 152-1341,1519, and 3571.  Insture of Debtor 1  tep 11/21/2019  but attach additional pages to Your Statement of the second pages to Your Statement of the Statement	that making a false statement, conceal result in fines up to \$250,000, or imprise Signature of Debtor 2  Date	ing property, or obtaining money or property by fraud priment for up to 20 years, or both.  uals Filing for Bankruptcy (Official Form 107)?
have answer in control is U.S.  Signature of the control is U.S.  Did you will not	read the answers on this Statement ers are true and correct. I understand mection with a pankruptcy case can s.C. §§ 152-1341, 1519, and 3571.  Insture of Debtor 1  tep 1/21/2019  ou attach additional pages to Your S. o es	that making a false statement, conceal result in fines up to \$250,000, or imprise Signature of Debtor 2  Date	ing property, or obtaining money or property by fraud priment for up to 20 years, or both.  uals Filing for Bankruptcy (Official Form 107)?